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		40100	00.404	JUN 0 7720	
TRANSMITTAL FORM		Application No.: 10/022,101			
		Filing Date: April 8, 2004			
		First Named Inventor: AGOSTINO TUCCIARONE			
		Group Art Unit: Unknown		AFFIA?	
		Examiner Name: Unassigned		()FFI()	
Total Number of Pages in This Su	bmission: _4_	Attorney Docket No.:	AT-11		
	NCLOSURE	S (check all that apply)			
[] Fee Transmittal Form [] Fee attached [] Amendment / Reply [] After Final [] Affidavits/declaration(s) [] Extension of Time Request [] Express Abandonment Request [] Information Disclosure Statement [] Certified Copy of Priority Document(s) [] Response to Missing Parts / Incomplete Application [] Response to Missing Parts under 37 CFR 1.52 or 1.53	[] Power of A Change of Address [] Terminal [[] Request for	lication) related Papers Convert to a Il Application Attorney, Revocation If Correspondence Disclaimer	[] After Allowance Comto Group [] Appeal Communicati Board of Appeals an Interferences [] Appeal Communicati Group (Appeal Notice Reply Brief) [] Proprietary Informati [] Status Letter [XX] Other Enclosures below): SUPPLEMENTA 6/7/04	ion to d ion to , Brief, ion (please identify	
SIGNA	TURE OF APP	LICANT, ATTORNEY,	OR AGENT		
Richard R. Batt Reg. 43,485	-	June 7, Z Date	084		
	CERTI	FICATE OF MAILING	ted States Datent and Trader	mark Office on	
I hereby certify that this correspondence is June 7, 2004 Michelle Nicely	facsimile transmitt	ed to 703-872-9308 to the Un	10 H 2001		

Jun 07 04 04:40p

SUPPLEMENTAL APPLICATION DATA SHEET

Application Information

Regular Application Type::

A Transverse Suspension Device Title::

AT-11 Attorney Docket Number::

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

No Small Entity?::

Applicant Information

Inventor Applicant Authority Type::

Primary Citizenship Country:: IT

Full Capacity Status::

Agostino Given Name::

Tucciarone Family Name::

Rome City of Residence::

IT Country of Residence::

Viale dell'Umanesimo 303 Street of mailing address::

Rome City of mailing address:: Italy

Country of mailing address::

Postal or Zip Code of

00144 mailing address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Great Britain

Status::

Full Capacity

Given Name::

Simon

Middle Name::

David

Family Name::

Mifsud

England

Name Suffix::

City of Residence::

West Midlands

Country of Residence::

Street of mailing address::

2 Polo Fields, Pedmore

City of mailing address::

West Midlands

State or Province of

mailing address::

England

Country of mailing address::

England

Postal or Zip Code of

mailing address::

DFY9 0SQ

Correspondence Information

Correspondence Customer Number::

021394

Name::

ArthroCare Corporation

Street of mailing address::

680 Vaqueros Avenue

City of mailing address::

Sunnyvale

State or Province of mailing

address::

CA

Country of mailing address::

USA

Postal or Zip Code of mailing address:: 94085-3523

Phone number::

(408) 736-0224

Fax Number::

(408) 530-9143

E-Mail address::

rbatt@arthrocare.com

Representative Information

Jun 07 04 04:41p

Representative Customer Number:

021394

Foreign Priority Information

	La dian number:	Filing Date::	Priority Claimed
Country::	Application number::	15 April 2003	Yes
WO	PCT/GB03/01606		YES
	GB 0208667.6	16 APRIL 2002	
GB			

Assignee Information

Assignee name::

ArthroCare Corporation

Street of mailing address::

680 Vaqueros Avenue

City of mailing address::

Sunnyvale

State or Province of

mailing address::

California

Postal or Zip Code of

mailing address::

94085-3523